

EXHIBIT 173

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: WILLIAM SANDOVAL RIVERA
Participant's Address: EL RETIRO C#2 BUENON 32
Participant's Email Address: SANDOVAL BOQUERON CAGUAS, PR 00725
Name of Counsel: ORIENTAL SERVICE D.COM
Address of Counsel: ACOM + NUM NEB ORIENTAL FINANCIAL SERV. INC. MUNOS RIVERA AVE #2542ND FL SAN JUAN PR. 00918-1900
Email Address of Counsel: 068718

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: Num. 17BK 3283-LTS
Nature of Claim: PROMESA TITULO III
By: [Signature]
Signature: WILLIAM SANDOVAL
Print Name: PROMESA III
Title (if Participant is not an individual): 8/4/2021
Date

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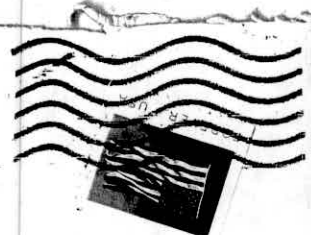
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Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

WILLIAM SANDOVAL
EL BUEN RETIRO #2
BUZON 32 @aguas
PTA LLC
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